

In re: George Sarris
DebtorCase No. 1932528
Reporting Period 9/30/20

INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS

(This Form must be submitted for each Bank Account maintained by the Debtor)

Amounts reported should be per the debtor's books, not the bank statement. The beginning cash should be the ending cash from the prior month or, if this is the first report, the amount should be the balance on the date the petition was filed. Attach the bank statements and a detailed list of all disbursements made during the report period that includes the date, the check number, the payee, the transaction description, and the amount. A bank reconciliation must be attached for each account. [See MOR-1 (INDV) (CONT)]

	Current Month Actual	Cumulative Filing to Date Actual
Cash - Beginning of Month	<u>297.16</u>	
RECEIPTS		
Wages (Net) <u>Wenlognot</u>	<u>2070.00</u>	
Interest and Dividend Income		
Alimony and Child Support		
Social Security and Pension Income		
Sale of Assets	<u>2446.00</u>	
Other Income (attach schedule)	<u>400.00</u>	
Total Receipts	<u>4,916.00</u>	
DISBURSEMENTS		
ORDINARY ITEMS:		
Mortgage Payment(s)	<u>1211.47</u>	
Rental Payment(s)		
Other Secured Note Payments		
Utilities	<u>1136.15</u>	
Insurance		
Auto Expense	<u>78.90</u>	
Lease Payments		
IRA Contributions		
Repairs and Maintenance		
Medical Expenses	<u>660.84</u>	
Household Expenses	<u>168.91</u>	
Charitable Contributions	<u>10.00</u>	
Alimony and Child Support Payments		
Taxes - Real Estate		
Taxes - Personal Property		
Taxes - Other (attach schedule)		
Travel and Entertainment		
Gifts		
Other (attach schedule)	<u>1047.08</u>	
Total Ordinary Disbursements		
REORGANIZATION ITEMS:		
Professional Fees		
U. S. Trustee Fees	<u>326.07</u>	
Other Reorganization Expenses (attach schedule)		
Total Reorganization Items		
Total Disbursements (Ordinary + Reorganization)	<u>4589.42</u>	
Net Cash Flow (Total Receipts - Total Disbursements)	<u>326.58</u>	
Cash - End of Month (Must equal reconciled bank statement)	<u>573.74</u>	

In re George Smith
Debtor

Case No. 193 2528
Reporting Period: 9/30/20

INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS - continuation sheet

BREAKDOWN OF "OTHER" CATEGORY	Current Month Actual	Cumulative Filing to Date Actual
Other Income <u>From Wife</u>	<u>400.00</u>	
Other Taxes		
Other Ordinary Disbursements <u>Food</u> <u>Take out</u> <u>To wife for car Payment</u> <u>Credit Card Payments</u> <u>Birthday Present</u>	<u>388.45</u> <u>144.39</u> <u>200.00</u> <u>228.95</u> <u>85.29</u> <u>1047.08</u>	
Other Reorganization Expenses		

FORM MOR-I (INDV) (CONT)
(9.99)

UNITED STATES BANKRUPTCY COURT
DISTRICT OF _____

In re George Santas

Case No. 193 2528
Reporting Period: 8/30/20

MONTHLY OPERATING REPORT
(INDIVIDUAL WAGE EARNERS)

File with Court and submit copy to United States Trustee within 20 days after end of month

Include FORM MOR-1 (INDV) if debtor is a wage earner.

Substitute FORM MOR-2 (RE) for MOR-2 if case is a Single Asset Real Estate case.

Submit copy of report to any official committee appointed in the case.

REQUIRED DOCUMENTS	Form No.	Document Attached	Explanation Attached
Schedule of Cash Receipts and Disbursements	MOR-1 (INDV)		
Bank Reconciliation (or copies of debtor's bank reconciliations)	MOR-1 (CONT)		
Copies of bank statements			
Cash disbursements journals			
Statement of Operations			
Balance Sheet			
Status of Postpetition Taxes			
Copies of IRS Form 6123 or payment receipt			
Copies of tax returns filed during reporting period			
Summary of Unpaid Postpetition Debts			
Listing of aged accounts payable			
Accounts Receivable Reconciliation and Aging			
Debtor Questionnaire			

I declare under penalty of perjury (28 U.S.C. Section 1746) that the documents attached to this report are true and correct to the best of my knowledge and belief.

Signature of Debtor

Date 10/20/20

Signature of Joint Debtor

Date

Signature of Authorized Individual*

Date

Printed Name of Authorized Individual

Title of Authorized Individual

*Authorized individual must be an officer, director or shareholder if debtor is a corporation; a partner if debtor is a partnership; a manager or member if debtor is a limited liability company.

FORM MOR (INDV)
(9.99)

For customer service
or current rates
call: 732-591-2530

✉ Write to:
Amboy Bank
3590 U. S. Highway 9
Old Bridge, NJ 08857

Visit us at
www.amboybank.com

Amboy 24
(Telephone Banking)
call 1-877-24AMBOY

GEORGE SARIOTIS
DEBTOR IN POSSESSION
1801 PITNEY STREET
OAKHURST NJ 07755-2840

Annual Food Drive

We will be collecting for local food banks
throughout the month of November.
Drop off your donations at your local branch.
to win a fun giveaway

Free Personal Check Account

Account number: 17007747

Account Balance Summary

Beginning Balance on 09-15	\$247.16
Deposits and other credits (+)	\$4,916.00
Withdrawals, checks and other debits (-)	\$4,589.42
Ending Balance on 10-15	\$573.74

Deposits and Other Credits

Date	Description	Amount	Date	Description	Amount
09-18	DEPOSIT	400.00	09-23	XXXXX0578 STATE OF NJ - LA UI-DUA	230.00
09-21	XXXXX0578 STATE OF NJ - LA UI-DUA	230.00	09-23	XXXXX3126A SSA SSA TREAS 310	2,446.00
09-21	XXXXX0578 STATE OF NJ - LA UI-DUA	230.00		XXSOC SEC	
09-21	XXXXX0578 STATE OF NJ - LA UI-DUA	230.00	09-30	XXXXX0578 STATE OF NJ - LA UI-DUA	230.00
09-21	XXXXX0578 STATE OF NJ - LA UI-DUA	230.00	10-07	XXXXX0578 STATE OF NJ - LA UI-DUA	230.00
09-21	XXXXX0578 STATE OF NJ - LA UI-DUA	230.00	10-14	XXXXX0578 STATE OF NJ - LA UI-DUA	230.00

Checks

Check #	Date	Amount	Check #	Date	Amount	Check #	Date	Amount
135	09-22	118.02 ✓	138	10-01	326.07 ✓	142	10-09	200.00 ✓
136	09-28	69.80 ✓	139*	09-25	65.00 ✓	143	10-08	50.00 ✓
137	09-28	28.25 ✓	141	10-02	200.00 ✓			

*Indicates a gap in check number sequence

GEORGE SARIOTIS

Free Personal Check Account

Account number: 17007747

Withdrawals and Other Debits

Date	Description	Amount	Date	Description	Amount
09-21	53014 - WINRED* TRUMP MA <i>Down</i> HTTPSWINRED.C VA 00000000 053014	10.00 ✓	09-28	11913 - THEPOURHOUSE SHREWSBURY TO NJ 78154388 011913	48.00 ✓
09-21	62767 - COSTCO GAS #0329 OCEAN NJ <i>Gas</i> 0329013 062767	28.90 ✓	09-28	75853 - CBD FOR LIFE 732-5448295 NJ <i>med</i> 75068880 075853	136.65 ✓
09-21	47508 - TST* THE GALLEY ASBURY TO PARK NJ 01547508 047508	35.64 ✓	09-28	AHC3015109 AETNA HEALTH INS INS <i>med</i> PYMT	284.88 ✓
09-21	81475 - SXM*SIRIUSXM.COM 888-635-5144 <i>Phone</i> NY 00000000 081475	37.52 ✓	09-29	98614 - APPLE.COM/BILL 866-712-7753 CA <i>Item</i> 00000000 098614	0.99 ✓
09-21	79721 - CVS/PHARMACY #07 OAKHURST <i>med</i> NJ 00000000 079721	53.92 ✓	09-29	63220 - SQ *ROOK COFFEE Oakhurst NJ TO 00000000 063220	8.58 ✓
09-22	40198076 Credit One Bank Payment <i>CC PM</i>	127.00 ✓	09-29	75664 - DTV*DIRECTV SERV 800-347-3288 <i>Util</i> CA 00000000 075664	201.05 ✓
09-23	PAYMENTUSCORP_I PAYMENTUS BILLPAY	1.95 ✓	09-30	1918898397 CREDITCARD PYMNT <i>CCP</i> PAYBYPHONE	100.00 ✓
09-23	AMERICAN WATER AMERICAN WATER <i>Util</i> E BILLPAY	132.60 ✓	10-05	16568401 OPTIMUM 7866 CABLE PMNT <i>Util</i>	180.67 ✓
09-23	18671509092120 NJ NATURALGAS EBILL <i>Util</i>	350.54 ✓	10-08	81247 - APPLE.COM/BILL 866-712-7753 CA <i>Item</i> 00000000 081247	5.99 ✓
09-25	0031 - GROSSMAN'S DELI OAKHURST NJ TO 00005772 000031	19.17 ✓	10-09	SPECIALIZED LOAN CHECKPAYMT 0140 <i>Mortgage</i>	1,211.47 ✓
09-25	7675 - BJS WHOLESALE #0 OAKHURST NJ <i>Food</i> 00000000 007675	123.45 ✓	10-13	7456 - APPLE.COM/BILL 866-712-7753 CA <i>Item</i> 00000000 007456	6.39 ✓
09-28	16522 - LA SCARPETTA WEST LONG BRA TO NJ 01956903 016522	33.00 ✓	10-13	18788 - DTV*DIRECTV SERV 800-347-3288 <i>Util</i> CA 00000000 018788	271.29 ✓
09-28	8750 - CVS/PHARMACY #07 Oakhurst NJ <i>med</i> 30718207 076664	37.34 ✓	10-14	261270 - AMAZON.COM*MK8WQ <i>Printed Prepaid</i> SEATTLE WA 00000101 6WD5FDE7DC5Q	85.29 ✓